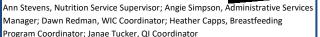
WIC Retention QI Project

Lake Cumberland District Health Department 500 Bourne Avenue Somerset, KY 42501



Quality Improvement Story Board

Team Members: Laura Woodrum, Director of Nursing;



PLAN

Problem Statement

WIC participation and retention rates have been steadily declining across the district over the last couple of years per the Kentucky Department of Public Health Participation Summary Report that is sent out monthly.

Aim Statement

Increase WIC participation/retention rates by 10% in 3 counties (Adair, Casey, and Taylor) by June 30, 2020.

Process Outline & Relevant Data

We need to find out why clients are not returning for the WIC benefits after enrolling in the program and address these issues if possible. We plan to gather this information via WIC participant surveys. Peer counselors will conduct telephone surveys.

Collected data shows that participants who should return for their postpartum visit and children (when the infant turns 1 year of age and no longer require infant formula) are not keeping return appointments.

When appointments were scheduled in there was only a 30% show rate. Same day scheduling was implemented a few years ago, hoping to improve show rates, but WIC participation has continued to decline.

Identify Potential Causes

- Forget it is time for WIC appt until they go to store and have no benefits
- •Clients do not understand how the same day scheduling works
- •Don't want to get out of bed at 8 am to call in
- Don't want to attend WIC "classes"
- Don't need benefits due to food stamp increases
- Lack of appointments

Identify Potential Solutions

- Continue working 7-day and 30-day late reports, also call patients when they have missed an appt
- •Call patients and offer them an appt on the days that clinic is not busy
- Take walk-ins whenever they come in if at all possible
- •Maybe walk-in time should be in the afternoon instead of at 8 am, if can't be seen issue benefits for one month
- Assigning follow appts to Quick WIC class time slots in the larger clinics
- Possibly have HC provider issue benefits to speed up visits
- Have peer counselors go to daycare centers and give parents information on WIC benefits and that children <5 are still eligible for benefits
- •Review scheduling policy annually, especially the WIC portion

Improvement Theory

If we could identify why patients are not returning for their WIC benefits when they are postpartum or after the infant turns one year old, then we could address these issues and increase participation/retention rates.

DO

Test the Theory

Peer counselors called consumers that were not returning for WIC appointments to gather information regarding reasons for not coming in. Survey results showed that most people just "forgot" to return. We already have a reminder system. 65% of the respondents wanted afternoon appointments, which are available now if patient calls at 8 am that morning. 85% of those who responded requested a text reminder to notify them of their appointment and whether they needed to bring their child or not.

CHECK

Study the Results

No significant improvements could be implemented based on the survey results. Reminders are sent to patients when their WIC is due via phone call, and text reminders if patient opts into those at registration. The KDPH WIC reminder system cannot customize messages or text for individual counties/participants. Pilot kiosk in one location was considered, but deemed not feasible at this time.

Appointments are available by walk-in from 8-11 AM. Participants call in the morning hours to schedule an afternoon appointment that same day. Future appointments are offered to participants who work and request a set appointment time. Even though these measures where implemented, the participation rates continued to decline (see attached graphs).

ACT

Standardize or Develop New Theory

This project was abandoned due to continued decline in participation rates to date. However, part of the reason who are abandoning the project is due to recent revisions to KY DPH WIC regulations/requirements changes as they become implemented due to statewide rates decreasing also. Their goal is to decrease the administrative burden on local agencies and increase access for participants. According to data reports for January 2020, there has been a slight increase in participation rates in our district.

Future Plans

Review scheduling policy annually, especially the WIC portion. Implement new federal/state guidelines/policies.

Certifications are required annually now, instead of every 6 months. Follow-up requirements remained the same, but we can now work late appointment reports and complete follow-up visits via phone when possible. Also, allow patients/guardians to complete follow-up requirements via online modules if preferred.

Date: 3/4/2020

